

# Work Order ID 50533

July 14, 2009 11:25:12 AM



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Item ID: DSI 9415-013

Accept



Setup Start



Revision ID: A

Stop



Item Name: Crosstube Support Change

Start Date: 7/14/09 Start Qty: 1.00



Cust Item ID:

Required Date: 7/14/09 Req'd Qty: 1.00



Customer:

Reference:

Approvals: Process Plan:

*W*

Date:

Tooling:

Date:

Run Start



QC:

Date:

SPC (Y/N):

Date:

Stop



Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Draw  
Number

Draw  
Rev.

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

Draw Nbr

Revision Nbr

DSI 9415

Rev A

100

0.00



DOCUMENT CONTROL

DC

Memo

0.00

Document Control

Photocopy bluefile & type labels per PPP DSI9415-013 CHG001

*507/07/14*

*U 07-07-14*

110

0.00



Pick Kit

Packaging

Memo

0.00

Packaging

120

0.00



QC4- 100% Inspect kits for completeness

QC

Memo

0.00

Quality Control

*⇒ 507/07/14 (+U)*

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

# Work Order ID 50533

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Item ID:	DSI 9415-013	Accept		Setup	Start	
Revision ID:	A				Stop	
Item Name:	Crosstube Support Change					
Start Date:	7/14/09	Start Qty:	1.00		Cust Item ID:	
Required Date:	7/14/09	Req'd Qty:	1.00		Customer:	
Reference:						

Approvals:	Process Plan:	Date:	Tooling:	Date:	Run	Start	
	QC:	Date:	SPC (Y/N):	Date:		Stop	

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Draw Number	Draw Rev.	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130 	Packaging	0.00							
Packaging	Memo	0.00							
Packaging	Identify and pack for shipping as per PPP DSI9415-013 <input type="checkbox"/> Location: _____ <input type="checkbox"/> PPP Rev: _____								
140 	QC21- Final Inspection - Work Order Release	0.00							
QC	Memo	0.00							
Quality Control									

9/17/14 SQ

09/07/14 HJ

W 09/07/14

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

**NOTE:** Date & initial all entries

# Picklist Print

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Work Order ID: 50533

Parent Item: DSI 9415-013RevA

Parent Item Name: Crosstube Support Change


Start Date: 7/14/09

Required Date: 7/14/09

Comments:

Start Qty: 1.00

Required Qty: 1.00

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Remaining Qty To Pick	Qty Issued	Date Issued	Status
D3595-075-450RevA		Manufactured	No			120	Each	78.0000	4.0000			
												
RUBBER CUSHION 7.5" x 4.50												

B43210

Warehouse

Loc Qty

Loc Code

Location

Main Warehouse

ST

78

78

43210

(42)

9/11/09

SD

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: \_\_\_\_\_ PAR #: \_\_\_\_\_ Fault Category: \_\_\_\_\_ NCR: Yes No DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA: N/C Closed: \_\_\_\_\_ Date: \_\_\_\_\_

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries